



Payment & Billing Options

Customer Name _____

Telephone Number _____

Automatic Payment Plan

To sign up for this free service, please fill out the form and send it with your personalized voided check or copy of a voided check. The account must be current. If it is a joint account, both signatures are required.

I (we) hereby authorize Cascade Communications Company to initiate debit entries to my (our) checking account indicated below and the depository (Bank) name below, to debit the same to such account and if necessary, to make adjustments to the account for any entries made in error.

Depository (Bank Name)

Branch Name

City, State, Zip

Name (s) on Account

ABA/Transit Number

Account No.

Signature of Account Owner Date

Signature of Joint Account Owner Date

Automatic Credit Card Payment Plan

To sign up for this free service, please fill out the form below. The account must be current. If it is a joint account, both signatures are required.

I (we) hereby authorize Cascade Communications Company to deduct payments from my (our) credit card account indicated below and the Credit Card Company name below, to deduct the same to such account and if necessary, to make adjustments to the account for any entries made in error.

Cardholder Name

_____ Mastercard _____ Visa _____ Discover

Credit Card Number

Expiration Date

3 Digit Security Pin

Authorized Signature Date

Paperless Billing

This form indicates your consent to accept electronic delivery of your bill to the email address provided. This form also indicates your consent to electronic delivery of all legally required notices or other information or communications concerning your account and services to the same email address. We may deliver your bill, notices, or other information and communications either electronically or as a printed paper copy through mail or other non-electronic delivery. If you would like to withdraw your consent to electronic delivery at any time and exclusively receive a paper copy of your bill, notices, or other information and communications through mail, please email info@cascadecomm.com or call 563-852-3710.

** When you sign up for paperless billing, it may take 1-2 bill cycles to become effective.

Name on Account

Account Number

Signature

Date

Email Address